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CONFIRMATION NO. 1249

Bib Data Sheet

SERIAL NUMBER 10/626,040	FILING OR 371 (c) DATE 07/24/2003 RULE	CLASS 602	GROUP ART UNIT 3772	ATTORI DOCKET 0156-2008
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APPLICANTS

Michael Lebner, Wellesley Hills, MA;

**** CONTINUING DATA *******

None kn-

**** FOREIGN APPLICATIONS *******

None kn

**IF REQUIRED, FOREIGN FILING
LICENSE GRANTED **** 04/02/2004

**** SMALL ENTITY ****

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MA	3	38	2
Verified and Acknowledged Examiner's Signature	Initials				

ADDRESS

Kevin M. Farrell
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 One New Hampshire Avenue
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TITLE

Device for laceration or incision closure

FILING FEE RECEIVED 537	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other
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Credit

